

Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi @jsitel.com

June 26, 2017

VIA Electronic Comment Filing System

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 14-58

2017 ETC Annual Report of Shoreham Telephone LLC

Study Area Code 140064

Dear Ms. Dortch:

On behalf of Shoreham Telephone LLC ("Company"), JSI files the attached FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.¹

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall JSI Vice President 301-459-7590

jkuykendall@jsitel.com

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	140064	
<015>	Study Area Name	Shoreham Telephone Company, LLC	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Megan Harvey	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2079929050 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	megan.harvey@ottcommunications.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

Data Con	ection Form									/ 2013	-0966/OIVIB COITTOI N	0. 3000-0819
<010>		tudy Area Code 140064										
<015>	Study Area Na	ame				Shoreham Te	lephone Company, I	LC				
<020>	Program Year					2018						
<030>	Contact Name	e - Person USA	Should contac	t regarding this	s data	Megan Harve						
<035>	Contact Telep	hone Number	- Number of pe	rson identified	in data line <0	30> 2079929050	ext.					
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	l in data line <0	30> megan.harve	y@ottcommunication	ns.com				
<210>	For the prior	r calendar vea	ar. were there	any reportal	ole voice serv	ice outages?	No					
<220>	<a>	<b1></b1>	/ <b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS		1							Did This Outage	8	
	Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
	<u> </u>											

	fulfilled Service Request lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060- July 2013	0819
<010>	Study Area Code		140064		
<015>	Study Area Name		Shoreham Telephone Company, LLC		
<020>	Program Year		2018		
<030> Contact Name - Person USAC should contact regarding this data		Megan Harvey			
<035> Contact Telephone Number - Number of person identified in data line <030>		2079929050 ext.			
<039>	Contact Email Address - Email Address of person	n identified in data line <030>	megan.harvey@ottcommunications.com		
<300> U	Infulfilled service request (voice)		0		
<310>[Detail on attempts (voice)				
	•	Nam	e of Attached Document		
<320>	Unfulfilled service request (broadband)		2		
		140064vt330.pdf			
<330>	Detail on attempts (broadband)				
		1	Name of Attached Document		

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	140064	
<015>	Study Area Name	Shoreham Telephone Company, LLC	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should conta	ct regarding this data Megan Harv	ey
<035>	Contact Telephone Number - Number of p <030>		929050 ext.
<039>	Contact Email Address - Email Address of p <030>	erson identified in data line mes	gan.harvey@ottcommunications.com
<400>	Select from the drop-down list to indicate I voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or ot	telephony service in the prior of the prior	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed v	pice 2	. 0
<420>	Complaints per 1000 customers for mobile	voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or grethe prior calendar year for each service are an ETC for any facilities you own, operate,	ater) for broadband service in a large at a large at a large at a large designated	Offered only fixed broadband
<440>	Complaints per 1000 customers for fixed b	roadband 3.	0
<450>	Complaints per 1000 customers for mobile	broadband	

•	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	140064	
<015>	Study Area Name	Shoreham Telephone Company, LLC	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com	
<500>	Certify compliance with applicable service quality standards and consumer pro	otection rules Yes	
		140064vt510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ales Compliance	
<515>	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Situations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	140064vt610.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	140064	
<015> Study Area Name	Shoreham Telephone Company, LLC	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Megan Harvey	
<035> Contact Telephone Number - Number of person identified in data	line <030> 2079929050 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> megan.harvey@ottcommunications.com	
<701> Residential Local Service Charge Effective Date 1/1/2017 <702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
									+
					See at	tached worksheet			
									1
				•					
									1

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	40064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				 See attack worksheet - 	hed				
				, romanos					

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		140064
<015>	Study Area Name		Shoreham Telephone Company, LLC
<020>	Program Year		2018
<030>	Contact Name - Person L	JSAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - I	Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<810>	Reporting Carrier	Shoreham Telephone LLC	
<811>	Holding Company	Otelco Inc.	
<812>	Operating Company	Shoreham Telephone LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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-	See atta	ched worksh	eet
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(900) Tri	bal Lands Reporting	FCC Form 481	
	lection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819)
		July 2013	
<010>	Study Area Code	140064	
<015>	Study Area Name	Shoreham Telephone Company, LLC	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey 2079929050 ext.	
<035>	Contact Telephone Number - Number of person identified in data line <030>		
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of Attached Document	
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:		Select Yes or No or Not Applicable	
<921> <922>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
<927>	Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		
<929>	Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements.		
~JZJ/	compliance with fribal business and Licensing requirements.	<u> </u>	

	oice and Broadband Service Rate Comparability ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		140064	
<015>	Study Area Name		Shoreham Telephone Company, LLC	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data line <03	30>	2079929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <0	030>	megan.harvey@ottcommunications.com	
<1000>	Voice services rate comparability certification	Yes		
<1010>	Attach detailed description for voice services rate comparability compliance			
			Name of Attached Documer	nt
<1020>	Broadband comparability certification		- Pricing is no more than the Wireline Competition Bureau	e most recent applicable benchmark announced by
<1030>	Attach detailed description for broadband comparability compliance			
			Name of Attached Docume	nt

(1100) N	o Terrestrial Backhaul Reporting	FCC Fo	orm 481
Data Col	lection Form	OMB July 20	Control No. 3060-0986/OMB Control No. 3060-0819 013
<010> <015>	Study Area Code Study Area Name	140064	
<020>	Program Year	Shoreham Telephone Company, LLC 2018	
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	rms and Condition for Lifeline Customers	FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form	July 2013
<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
		Name of Attached Document
<1220>	Link to Public Website HTTP ht	tps://www.ottcommunications.com/pdfs/Shoreham_Local_Tariff_CURRENT_(6-1-2017).pdf
or the we	neck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to a)(2) annual reporting for ETCs receiving low-income support, carriers must eport:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2005) Price Cap Carrier Additional Documentation Data Collection Form Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	140064	
<015>	Study Area Name	Shoreham Telephone Company, LLC	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data Megan Harvey Contact Telephone Number of person identified in data line colors 2079929050 ext.		
<035>	Contact Telephone Number - Number of person identified in data line <030>		
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in		
	question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for		
	projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.		
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect		
	America Phase I deployment obligations, accompanied by a list of		
	census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?	Trequired information	
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for	Name of Attached Document Listing	
	year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		
-2010	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		

Data Collection Fo	Carrier Additional Documentation orm Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A>	Connect America Fund Phase II recipient?			
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.			
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information		
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)			

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

	Progress Report on 5 Year Plan			
(3009)	Carrier certifies to 54.313(f)(1)(iii)		· gameisia	
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}	Y	Yes - Attach Certifica	140064vt3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Docu Information	ument Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community	Anchors	
(3012B)	Please Provide Attachment	Name of Attached Docu Information	ument Listing Required	
(3013)	Is your company a Privately Held ROR Carrier $\{47\ CFR\ \S\ 54.313(f)(2)\}$		0 0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)		
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports			
	(Operating Report for Telecommunications Borrowers)			
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Docu Information	ument Listing Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	0 0	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			ļ
(3026)	Attach the worksheet listing required information	Name of Attached Docu Information	ument Listing Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

Financial Data Summary	
·	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(,	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data l	ine <030> megan.harvey@ottcommunications.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b . Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)
4004a . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information
4004b . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband	Name of Attached Document Listing Required Information ————————————————————————————————————

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
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<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	140064
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<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.

megan.harvey@ottcommunications.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier						
I certify that (Name of Agent) John Staurulakis, Inc. is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.						
Name of Authorized Agent: John Staurulakis, Inc.						
Name of Reporting Carrier: Shoreham Telephone Company, L.	LC					
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/23/2017					
Printed name of Authorized Officer: Dennis Andrews						
Title or position of Authorized Officer: Senior Vice President						
Telephone number of Authorized Officer: 2565861420 ext.						
Study Area Code of Reporting Carrier: 140064	Filing Due Date for this form: 07/03/2017					
, 9	ed by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment Fitle 18 of the United States Code, 18 U.S.C. § 1001.					

TO BE COMPLETED BY THE AUTHORIZED AGENT:

<030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030>

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behal	f of Reportin	g Carrier
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on b the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported he		
Name of Reporting Carrier: Shoreham Telephone Company, LLC		
Name of Authorized Agent Firm: John Staurulakis, Inc.		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/23/2017
Name of Authorized Agent Employee: John Staurulakis, Inc.		
Title or position of Authorized Agent or Employee of Agent Staff Consultant		
Telephone number of Authorized Agent or Employee of Agent: 3014597590 ext.		
Study Area Code of Reporting Carrier: 140064 Filing Due Date for this form: 07/03/2017		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. § 18 of the United States Code, 18 U.S.C. § 1001.	§ 502, 503(b), or	fine or imprisonment under Title



		DESCRIPTION OF SERVICE	SERVICE REQUESTED (V A	SERVICE REQUESTED (√ ALL APPLICABLE		DESCRIBE HOW CARRIER ATTEMPTED TO
REF	CUSTOMER NAME	REQUESTED	TO UNFULFILLED R	EQUEST)	BROADBAND	PROVIDE SERVICE
			BROADBAND VOICE		SPEED REQUESTED	
1	Customer 1	Customer requested 6MB	V			Customer is 19,208 feet from the remote. 1MB is the only offering available at this location. Customer installed with the offering.
2	Customer 2	Customer requested 10MB	· •			Customer is 23,383 feet from the remote. 1MB is the only offering available at this location. This customer was upgraded in 2017 and is currently getting 9.6MB.

Shoreham Telephone LLC Line 510

Service Quality Standards and Consumer Protection Rules

The company complies with applicable service quality standards and consumer protections, including, without limitation: (1) compiling monthly trouble report data and submitting the data on a quarterly basis to the Vermont Public Service Board ("VTPSB"); (2) reporting major service interruptions to the VTPSB in a manner consistent with its orders and rules; (3) maintaining local service rate schedules on file, giving notice of changes to such rate schedules to the VTPSB upon request, and making rate and service information available for public inspection at the company's offices; (4) clearly listing all charges and credits on customers' bills; (5) providing full and prompt investigation of, and response to, customer complaints in accordance with dispute resolution procedures established by the VTPSB; (6) providing access to enhanced 911 emergency report centers; (7) participating in a statewide system to assist the hearing impaired and providing service discounts for the deaf, hard of hearing, blind and visually impaired; (8) complying with federal CPNI rules and other applicable consumer privacy protection requirements, including training of employees that have access to CPNI on the rules and procedures for protecting account information and authenticating callers; and (9) implementing procedures that are consistent with the FTC's guidance on measures to detect/prevent identity theft (Red Flag).

In addition, the company adheres to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service, and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3. The Company furthermore will comply with all requirements set forth in the 2015 Open Internet Order when it becomes effective.

Shoreham Telephone LLC Line 610

Functionality in Emergency Situations

The company certifies it is able to function in emergency situations. The company has a combination of permanently placed generators at its central office(s), business office(s), 24 x 7 Network Operations Center, and other mission critical locations, plus numerous portable generators for use at remote switching sites. In addition to onsite technicians, all systems are accessible via our remotely located 24 x 7 staffed Network Operations Center, with on-call technicians available 24 hours a day. Poles, cables, central office, remote, and miscellaneous plant equipment are kept at various sites and are available for emergency repairs. Technicians and Operations Management staff carry company-provided cells phones which are used on a daily basis and to maintain a communication link in the event of a major outage on our network or during emergency situations. The company complies with the FCC's backup power requirements, effective October 16, 2015.

(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		140064	
<015>	Study Area Name		Shoreham Telephone Company, LLC	
<020>	> Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Megan Harvey	
<035>	Contact Telephone Number - Number of person identified in data lin	ne <030>	2079929050 ext.	
<039>	39> Contact Email Address - Email Address of person identified in data line <030>		megan.harvey@ottcommunications.com	
·				
<701>	Residential Local Service Charge Effective Date	1/1/2017		
<702>	Single State-wide Residential Local Service Charge	•		

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
VT	Benson		FR	19.998	0.0	0.4	0.0	20.4
VT	Benson		FR	19.65	0.0	0.393	0.0	20.04
VT	Cornwall		FR	19.89	0.0	0.398	0.0	20.29
VT	Cornwall		FR	19.65	0.0	0.393	0.0	20.04
VT	Hubbardton		FR	19.648	0.0	0.393	0.0	20.04
VT	Hubbardton		FR	19.65	0.0	0.393	0.0	20.04
VT	Orwell		FR	19.881	0.0	0.398	0.0	20.28
VT	Orwell		FR	19.65	0.0	0.393	0.0	20.04
VT	Shoreham		FR	19.843	0.0	0.397	0.0	20.24
VT	Shoreham		FR	19.65	0.0	0.393	0.0	20.04
VT	Whiting		FR	20.038	0.0	0.401	0.0	20.44
VT	Whiting		FR	19.65	0.0	0.393	0.0	20.04
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(710) Broadband Price Offerin
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	140064
<015>	Study Area Name	Shoreham Telephone Company, LLC
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>	2079929050 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	megan.harvey@ottcommunications.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	VT	ALL	54.95	0.0	54.95	5.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	59.95	0.0	59.95	10.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	64.95	0.0	64.95	25.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	69.95	0.0	69.95	40.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	59.95	0.0	59.95	5.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	64.95	0.0	64.95	10.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	69.95	0.0	69.95	25.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	74.95	0.0	74.95	40.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	26.0	0.0	26.0	5.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	35.5	0.0	35.5	10.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	44.75	0.0	44.75	25.0	1.0	999999.0	Other, No limit on usage allowance.
	VT	ALL	54.75	0.0	54.75	40.0	1.0	999999.0	Other, No limit on usage allowance.

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		140064
<015>	Study Area Name		Shoreham Telephone Company, LLC
<020>	Program Year		2018
<030>	Contact Name - Person USA	AC should contact regarding this data	Megan Harvey
<035>	Contact Telephone Number - Number of person identified in data line <030>		2079929050 ext.
<039>	> Contact Email Address - Email Address of person identified in data line <030>		megan.harvey@ottcommunications.com
<810>	Reporting Carrier	Shoreham Telephone LLC	
<811>	Holding Company	Otelco Inc.	
<812>	Operating Company	Shoreham Telephone LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
·	CRC Communications		OTT Communications
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Shoreham Telephone LLC (SAC 140064)

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Shoreham Telephone LLC hereby certifies that throughout 2017, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time. If a request for broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream is unreasonable, the Company offers broadband service at the highest available speed.